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06-20-01

EQ3:QGC:130546/nkg WENMM/SB/05 (4-01)

Approved for use through 10/31/2002. OMB 0651-0032
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J6962 U.S.P.T.O.
Form 14

UTILITY PATENT APPLICATION TRANSMITTAL

Only for new nonprovisional applications under 37 CFR § 1.53(b)

Attorney Docket No.	31075-7 EQ3
First Inventor	Jingsong Xia
Title	COMBINED TRELLIS DECODER AND DECISION FEEDBACK EQUALIZER
Express Mail Label No.	EM372933022US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

Assistant Commissioner for Patents
ADDRESS TO: Box Patent Application
Washington, DC 20231

<input checked="" type="checkbox"/> 1. Fee Transmittal Form (e.g., PTO/SB/17) <i>(submit an original and a duplicate for fee processing)</i>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
<input checked="" type="checkbox"/> 2. Applicant claims small entity status.	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>	
<input checked="" type="checkbox"/> 3. Specification <i>(preferred arrangement set forth below)</i>	a. <input type="checkbox"/> Computer Readable Form (CRF)	
- Descriptive title of the Invention	b. <input type="checkbox"/> Specification Sequence Listing on:	
- Cross References to Related Applications	<input type="checkbox"/> CD-ROM or CD-R (2 copies); or	
- Statement Regarding Fed sponsored R & D	<input type="checkbox"/> paper	
- Reference sequence listing, a table, or a computer program listing appendix or computer program listing appendix	c. <input type="checkbox"/> Statements verifying identity of above copies	
- Background of the Invention		
- Brief Summary of the Invention		
- Brief Description of the Drawings <i>(if filed)</i>		
- Detailed Description		
- Claim(s)		
- Abstract of the Disclosure		
 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 15]		
5. Oath or Declaration <u>Unsigned</u> [Total Pages 3]		
a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application; see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).		
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		
7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))		
10. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <i>(when there is an assignee)</i>		<input type="checkbox"/> Power of Attorney
11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>		
12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449		<input checked="" type="checkbox"/> Copies of IDS Citations (6)
13. <input type="checkbox"/> Preliminary Amendment		
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>		
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>		
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.		
17. <input checked="" type="checkbox"/> Other: Check in the amount of \$435.00.....		

18. If a CONTINUATING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No: _____
 Prior application information: Examiner: _____ Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach barcode/label here)			or	<input checked="" type="checkbox"/> Correspondence address below
Name	Troy J. Cole Woodard, Emhardt, Naughton, Moriarty and McNett				
Address	Bank One Center/Tower 111 Monument Circle, Suite 3700				
City	Indianapolis	State	IN	Zip Code	46204-5137
Country	USA	Telephone	(317) 634-3456	Fax	(317) 637-7561
Name (Print/Type)	Troy J. Cole			Registration No. (Attorney/Agent)	35,102
Signature	<i>Troy J. Cole</i>			Date	June 19, 2001

Express Mail Label Number EM372933022US**Date of Deposit** JUNE 19, 2001

I hereby certify that this paper is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR Section 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington DC 20231.

Noreetta X. Groppe

Signature of person mailing paper or fee

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FEE TRANSMITTAL FOR FY 2001

Patent fees are subject to annual revision.

EM372933022US

Total Amount of Payment (\$ 435.00)

Complete if Known

Application Number	New
Filing Date	
First Named Inventor	Jingsong Xia
Group Art Unit	
Examiner Name	

Attorney Docket Number	31075-7 EQ3
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METHOD OF PAYMENT

1. <input type="checkbox"/>	The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:	FEE CALCULATION (continued)			
Deposit Account Number	23-3030	3. ADDITIONAL FEES			
Deposit Account Name	Woodard, Emhardt, Naughton, Moriarty & McNett	Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)
<input checked="" type="checkbox"/>	Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17	105	130	205	65
<input checked="" type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.	127	50	227	25

2. <input checked="" type="checkbox"/>	Payment Enclosed:
	<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other

FEE CALCULATION

1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility Filing Fee	355.00
106	320	206	160	Design Filing Fee	
107	490	207	245	Plant Filing Fee	
108	710	208	355	Reissue Filing Fee	
114	150	214	75	Provisional Filing Fee	
SUBTOTAL (1) (\$ 355.00)					

2. EXTRA CLAIM FEES

Total Claims	13	-20** =	0	X	Extra Claims	Fee From Below	Fee Paid
Independent Claims	5	-3** =	2	X	40	=	80.00
Multiple Dependent							

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$ 40.00)				

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES	Fee Description	Fee Paid
105	130	205
127	50	227
139	130	139
147	2,520	147
112	920*	112
113	1,840*	113
115	110	215
116	390	216
117	890	217
118	1,390	218
128	1,890	228
119	310	219
120	310	220
121	270	221
138	1,510	138
140	110	240
141	1,240	241
142	1,240	242
143	440	243
144	600	244
122	130	122
123	50	123
126	180	126
581	40	581
146	710	246
149	710	249
179	710	279
169	900	169
Other Fee (specify)		
* Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$)

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Troy J. Cole	Registration No. (Attorney/Agent)	35,102	Telephone (317) 634-3456
Signature		Date	June 19, 2001	

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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